SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X. The Corporation Company  Addressee  B. Received by (Printed Name)  D. Is delivery address different from item 1?   Yes
Union Carbide Corporation c/o The Corporation Company 30600 Telegraph Road Bingham Farms, MI 48025	If YES, enter delivery address below: ☐ No
	3. Service Type  Certified Mail
OTCVIOLUL SUC	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)  7 0 0 3	3 3110 0004 0800 3255
PS Form 3811, August 2001 Domestic F	Return Receipt 102595-02-M-1540